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ABSTRACT

There have been several major theories proposed to account for the development of stereotypes of old people. The literature on stereotyping of the elderly is reviewed, with an emphasis on the attitudes of various health workers, especially physicians and psychiatrists. The theories and supporting data of the classical psychoanalytic theory, psychodynamic theories, cognitive dissonance theory, status inconsistency theory, attribution theory, labeling theory, and Marxian social science theory are critiqued. The congruence among these theories is examined and the interactions between different frameworks discussed. The implications of this unified hypothesis focus on its impact on the delivery of health care services to the elderly. The self-fulfilling prophecy of stereotyping reinforces both the theories and the stereotypic behavior of old persons. Stereotype elimination requires societal restructuring and the creation of meaningful roles for the elderly. (Author/LS)

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THE DEVELOPMENT OF STEREOTYPES OF THE ELDERLY: TOWARD A UNIFIED HYPOTHESIS

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The gerontological and geriatric literature contains many papers discussing the provision and utilization of health care services by the elderly. Some of these publications, such as the paper by Redick, Kramer, and Taube (1973), present simple measures about the quantity of services provided older patients; absent are discussions of the quality or appropriateness of these services. However, it is clear to many workers that all too often, the services provided older patients are not matched to the individual needs of the elderly consumer and are therefore inappropriate in type, frequency, and orientation (Butler, 1975; Solomon & Vickers, in press).

One of the major hindrances to the individualization of services to the elderly is stereotyping. Solomon and Vickers (in press) have defined stereotyping as "the holding in common by the members of a group of a standardized mental picture representing an over-simplified and uncritical judgment by another group." Thus, individuality and individual characteristics are submerged by any stereotype that has developed. It does not matter if the stereotype is positive or negative, as either valuation requires that the individual be lumped into a group, thus submerging individual characteristics and traits. That health workers generally adhere to stereotypes of older people has been frequently documented in the literature (reviewed by McTavish, 1971; Solomon & Vickers, 1978; Stephens, 1978).

What is lacking in this literature is a theory of the development of stereotypes of the elderly. There is no theory that explains why an individual develops stereotypes and/or accepts societal stereotypes of the elderly. Nor is there any theory that accounts for the development of stereotypes of the elderly within societies. This paper will examine several theoretical orientations that have been offered to explain the development of stereotypes and review the data supporting these theories. Because these theories are not

mutually exclusive, the paper will examine some of the interfaces between these various theories and an attempt will be made to outline a unified hypothesis of stereotyping that explains both individual behavior and societal stereotyping.

SOCIAL CONTEXT

Stereotyping develops within a multivariate social context. One facet was hypothesized by Cook (1962), who suggested that experiences with the elderly that occur in a negative context lead to the acceptance of negative stereotypes of old people. On the other hand, experiences with the elderly in a positive social context lead not to positive stereotyping, but to the acceptance of the old person's individuality. The negative social context need not be negative in actuality, but needs to be perceived as negative by the individual. As the author has noted elsewhere (Solomon, 1978a), the consequences of stereotyping, such as learned helplessness in the health care setting, may reinforce negative stereotyping. On the other hand, one would expect that increasing exposure to the elderly in a context perceived as positive would lead to diminished stereotyping. Indeed, research by Hickey, Rakowski, Hultsch, and Fatula (1976), Auerbach and Levinson (1977), and Solomon and Vickers (in press) are preliminary data supporting this hypothesis.

Another contextual facet may be examined through social exchange theory. If a negative stereotype is present, through whatever mechanisms, the perceived benefits to the person interacting with an older person are diminished. It is also frequently perceived, such as in the health care setting, that these minimal benefits are associated with maximal costs (Solomon, 1978a). As old people accept the stereotypes of the elderly more than any other population group (Tuckman and Lorge, 1953a), they too perceive minimal benefits and maximal costs to their interactions with others, which only serves to further rein-

force the stereotypes.

A third facet relates to the concept of social cohesion. In order to maintain ongoing functioning in a society with minimal conflict, societies demand conformity of its members. This conformity is mediated, in part, through specific role definitions, role status, performance expectations, norms, power hierarchies, etc. Stereotypes may be reified as an equivalent of roles and expectations. Along with morality, criminal law, concepts of deviance, etc. (Slaby & Tancredi, 1975), the reification of these stereotypes then becomes one way that societal institutions collude to limit individual behavior and maintain the status quo and cohesion.

Within this contextual framework, it is necessary to examine how the stereotypes develop in the first place. One set of theories, derived from individual psychology and social psychology, may explain how individuals develop and accept stereotypes of older persons. Another set of theories, derived in part from Marxian social science theory, may explain how and why some societies develop negative stereotypes of old people and other societies do not. These theories will now be discussed.

PSYCHOLOGICAL AND SOCIAL PSYCHOLOGICAL THEORIES

The first theory that will be discussed is derived from Monsour's (1972) work on racial prejudice. He examined prejudice from an orientation derived from classical Freudian psychoanalysis. Stereotyping can be viewed as an attempt to resolve a conflicted Oedipal situation by representing an attack on the less desired parent or younger sibling in place of an attack on the more desired but ambivalently held parent. This attack on the less desired parent (who is also ambivalently held), is then projected onto an individual or group in society who is then characterized by the various undesirable traits of the ambivalently held object. The projection also becomes a mechanism by which this feared symbolic object becomes invested with feelings of guilt and fear,

which then leads to phobic avoidance of the stereotyped group. Thus, stereotyping and prejudice become intimately connected with guilt related to the incest taboo and one may avoid feared, negatively-valenced, symbolic objects by investing another object with negative characteristics, which then provides a rationalization for avoidance of the feared object, rapproachment with the loved object, and the establishment of psychological homeostasis.

Difficulties testing this theory relate to the usefulness of Freudian psychoanalytic theory as a heuristic tool for the understanding of psychological data; however, it is essentially an untestable theory at this time. Indeed, the evidence that Monsour (1972) cites for the development of his theory of prejudice consists of several case histories, an analysis of Classical literature, the metapsychological works of Freud and others, and some psychobiographical writings. What Monsour does not cite are research data because there are none to support his hypothesis.

A second theory for the development of stereotyping was developed by Tuckman and Lorge (1958). I will call this the "projection theory." In this particular study, they found that the more ill or dependent a subject was, the more likely that subject was willing to accept stereotypes of old people. They explained this by hypothesizing that stereotyping was related to the projection of one's physical and/or psychological status and fears onto the elderly. From this, one can hypothesize that a younger person may perceive his/her future as being ill, dependent, etc. The young person may then project these symptoms onto old people in an attempt to stifle (or repress) these fears, leading to the development and acceptance of stereotypes as a defense against this fear of a perceived future.

A third hypothesis has been investigated by Brubaker and Powers (1976). They interpreted published data on both positive and negative stereotyping

within a framework of cognitive dissonance theory (Festinger, 1957). They believe that the acceptance of stereotypes of old people is related to three factors: objective indicators of old age, subjective definition of self as old, and the individual's self-concept. The self-definitions are linked to reference others and how positively or negatively they are perceived. If the individual's self-concept is poor, and the definition of self is linked to a more positive view of others, the dissonance created allows the person to project his/her "negative" traits onto others. If these traits, such as objective indicators of old age, are also perceived as negative, then the negative attitude is projected onto the elderly, creating a negative stereotype. Psychological homeostasis is maintained, as the individual views him/herself as more "positive" vis-à-vis the old person. There is no direct research data supporting or contradicting this hypothesis.

A fourth, and also untested theoretical approach is derived from the theory of status inconsistency. In American society, different hierarcies of status have poor intercorrelations. Either real or perceived differences in status between hierarchies or ambivalently held statuses become a source of psychological stress. According to Warren (1970), this is because the state of status inconsistency is characterized by a lack of predictable behavioral reactions from others and/or having to anticipate norms associated with different statuses. In order to relieve this stress, the individual may either distort incoming information or alter the evaluative systems that present the dilemma. Thus, if one's status as an old person is ambivalently held by self or others or if one perceives one's future status to be on a lower hierarchical level than one's current status, the distress of aging may be relieved by the development of stereotypes of aging. This modifies status inconsistency by allowing the individual to anticipate clear-cut, predictable behavioral

reactions to old people. One may therefore anticipate normative behavior associated with interacting with older people. These stereotypes may further distort the incoming information about old people and alter the cognitive system that is used to evaluate one's interactions with old people. This leads to a further perpetuation of the stereotypes. To date, the author is unaware of any research that has been done to specifically examine the role of status inconsistency in the development and acceptance of stereotypes.

Another hypothesis related to the development and acceptance of stereotypes comes from labelling theory. In part because of various objective indicators of aging, such as grey hair, wrinkles, etc., a person is labelled as "old." According to labelling theory, persons who interact with a person with this label would then expect the labelled person to fulfill certain social roles and exhibit specific behavioral patterns. If society already had developed a stereotype of an old person, this stereotype may become the label, thus allowing an individual to respond to this labelled person according to this stereotype. Alternatively, the label may become a stereotype. Furthermore, labelled persons are rewarded for stereotyped behavior and punished for conventional behavior (Scheff, 1970), guaranteeing perpetuation of the label and stereotype. Although this theory would allow research into both attitudes and behavior, the author is aware of no studies that examine this particular theory.

A further elaboration of this theory was developed by Connor and Walsh (1977), who utilized attribution theory to look at the specific characteristics of the label. According to attribution theory, observers interpret an individual's behavior or characteristics within a framework of what has already been attributed to the individual. These attributes are more specific than the role behavior examined by labelling theory. If the label carries a negative valence, the observer will respond and interpret the behavior of an old individual in light of what the characteristics of the label, or stereotype, are. Gradually

the observer believes the stereotypic attributes, and then behaves in a way that reinforces the expectations that are the consequence of the stereotype. Thus, by acting in accordance to the expectations of the observer, the old person fits the stereotype. If the behavior of the old person is perceived to be in accordance with the stereotypic attributes, the old person also fits the stereotype and therefore reinforces this stereotype. By acting discordant to expectations, the old person then becomes the "exception to the rule", and, in a Catch-22 situation, also reinforces this stereotype. Eventually, as predicted by labelling theory, the old person him/herself may believe the stereotype and displays the expected attributes. The author is unaware of any research investigating this theory.

With the exception of Freudian psychoanalytic theory and the "projection theory", all of these theories assume that societal stereotypes exist. They attempt to explain how an individual comes to accept these stereotypes, which therefore forms a mechanism by which stereotypes are maintained and reinforced in society. None of these theories however, attempt to explain how societies develop the stereotypes in the first place.

Furthermore, these theories are limited by a remarkable paucity of research data. At best, each of these theories have only been investigated in one study, and the data comes out supportive of the theory. However, as reviewed by McTavish (1971), methodology in assessing attitudes toward and stereotypes of the elderly is hindered by a lack of clear and valid measures of stereotypes and attitudes. Instead, the measures that have been developed, such as the Tuckman-Lorge Questionnaire (Tuckman and Lorge, 1953b) tend to be a mixture of factual statements, anecdotal statements, commonly verbalized beliefs, scientific data, and myths. Other methodologies include sentence completions, such as the Golde-Kogan Questionnaire (Golde & Kogan, 1959), or structured, semi-structured,

unstructured interviews that may not be replicable. Other researchers have analyzed books, TV shows, and the like. Thus, research utilizing these theoretical approaches to acceptance of stereotypes of the elderly are quite limited. Much work is needed in the future to further examine these various approaches.

A SOCIOLOGIC THEORY

But if little has been done to investigate theories of the individual acceptance of stereotypes, less has been done to develop a theory of why societies develop stereotypes in the first place. In outlining this theory, I have attempted to integrate reviews of data such as those noted by McTavish (1971), which show that as societies become more industrialized, the attitudes towards the elderly become more negative. One must examine the cross-cultural data reviewed by Gutmann (1977) and Goody (1976) that allows one to examine differences in attitudes and stereotypes, as well as social roles, in different societies in the world. Specific data from other nations, such as Palmore's (1975) work on the elderly in Japan, must be examined. Historical data, such as those explicated by Laslett (1976) and Fisher (1977) must be integrated into theory.

In an attempt to conceptualize these and other data, the author is using, as a theoretical backbone, a hypothesis that attempts to relate societal structure to roles of the elderly (Solomon, 1978b). Exploitative or competitive societies, which emphasize individual gain or state gain over the good of the community, tend to not provide meaningful social roles for non-productive members of society, such as the elderly or mentally disordered. On the other hand, communalistic societies, which emphasize community gain over individual gain, provide meaningful social roles for all community members and encourage meaningful community involvement for all members.

Stereotypes are hypothesized to develop as part of the historical movements of societies. According to Marx ([1847] 1956), class struggle involving an "oppressed class"

accompanies all phases of historical development of a society. There is a need on the part of the exploiter class to devalue the exploited class in order to maximize power by controlling modes of production and consumption. Depending upon the historical stage of Western society, this exploiter class may be Greek freemen, feudal nobility, or what Navarro (1976) calls "the corporate class" of contemporary America. Status and role are intimately associated with one's productivity in these societies. Productivity is measured by one's ability to produce profits for the exploiter class and one's rate of consumption of these products, another mode of producing profits for the exploiter class. Particularly unproductive and non-consuming members of the exploited class may be singled out for devaluation. These groups are expendible, and may be safely ignored.

The elderly are only one of these non-productive, non-consuming groups in competitive or exploitative societies. As the elderly become less profit-producing, they are gradually given increasingly tenuous and informal roles in society (Rosow, 1976). These roles are generally peripheral and openly devalued roles, such as the role of babushka for Russian women (Streib, 1976). These peripheral roles further reduce productivity and consumption of goods, so that the aged become progressively more peripheral. These roles are necessary, as the old person still remains indirectly tied to modes of production. Along with the change in role, a more peripheral status is acquired, and the old person becomes more isolated and powerless. Eventually, if these peripheral, low status roles cannot be performed because of individual or societal factors, the old person lapses into rolelessness. This rolelessness is further reinforced by societal messages of uselessness, such as compulsory retirement or inadequate pensions, messages that further divorce the old person from the mainstream of society by alienating him/her further from modes of production

and consumption. Eventually, the old person believes that he/she is truly no longer a part of society.

But all people grow old, so society has a need to "explain" the non-productivity of its older members. The "explanations" often include references to the physical changes in old persons, "senility," the need for society to provide jobs for younger workers, etc. When these "explanations" are coupled with the need for devaluation noted above, negative stereotypes are developed. By a process akin to blaming the victim (Ryan, 1976; Brody, 1974), the exploited class as a group gradually begins to believe this stereotype (Tuckman and Lorge, 1953a) and acts accordingly, reinforcing the stereotypes. In addition, as a defense against the collective guilt on the part of the exploiter class, positive stereotyping may develop. However, as noted above, positive stereotyping negates individual characteristics as much as negative stereotypes.

A different process develops in communalistic societies, as the elderly continue to have an important role in the functioning of society (Goody, 1976). The elderly become elders and are given specific roles by virtue of their experience, wisdom, and leadership abilities. In societies with non-written languages, the elderly are the repository of the history of the society, assuring continuation of cultural characteristics, beliefs, rituals, etc. Thus, the elderly are assured of active involvement in the welfare and operations of the community, with clear delineation of roles. These societies seem to be more cognizant of individual differences between the elderly and eschew stereotypes of old people. The roles and status of the elderly are not tied to modes of production or consumption but rather are inherent in their wisdom, expertise, and experience as older individuals. Their individuality is respected, leading not to positive stereotyping but to non-stereotyping and acceptance of individuality.

Unfortunately, Marxian theory is like Freudian theory in that it is essentially untestable by current research methodology. However, like Freudian

theory, it provides a logical framework that has important heuristic value and attempts to organize much existing data into an understandable, rational, coherent framework. However, some data, such as those reviewed by Gutmann, (1977, and Goody (1976) support these concepts advanced in this paper. So does Fischer (1977), who documents the rise of negative attitudes in the United States to the time of the beginning of industrialism and "Manifest Destiny." Although he does not link the two phenomena, it is not coincidental that negative stereotypes began once old people became economically expendable. Further research into this bypothesis is clearly necessary at this time.

THEORETICAL INTERFACES

As there is no reason to believe that the theoretical approaches presented here are mutually exclusive, this paper will outline some of the major interfaces of these theories, interfaces that are exceedingly complex.

One way of looking at the interfaces is noted in Figure 1. These is a simple pseudo-mathematical equation that states that in some vague way, all these different theoretical approaches are additive (or perhaps synergistic). The model assumes that these factors are operative in every individual with the final outcome being individual acceptance of stereotypes.

Figure 2 shows another model that examines theoretical interfaces. This model is the "circular" model. It is assumed that all factors interact with all other factors. Somehow, in some mysterious, undefined way, the final result is the individual acceptance of stereotypes of the elderly. Both models are clearly inadequate to allow for careful examination of interfaces between the theories presented here.

In their stead, the author would like to propose the model which can be seen in Figure 3. The major areas of interface occur in a person's physical, psychological, and social status, the unpredictability and predictability of behavioral responses, and the production and relief of stress. The psycholo-

gical and sociological sequence of events that are hypothesized by "projection theory", cognitive dissonance theory, and status inconsistency theory all posit that these various events lead to changes in one's perceived physical, psychological, and/or social status. Specifically, this perceived change in status is the starting point of "projection theory." Cognitive dissonance results in this changed status by two mechanisms. One is the reality of various objective indicators which forces a change in one's self-perceptions and the perceptions of others. The second mechanism relates to changes in one's self-concept which is both a product of and an input into the change in status. Finally, the inconsistency of status hierarchies, either present or future, requires an individual to examine his/her own status.

These changes or inconsistency in status may then produce fear or difficulty in predicting behavioral responses on the part of others. According to psychoanalytic theory, the unresolved Oedipal conflict would also produce fear and anxiety. These fears are clear-cut psychological stressors, regardless of cause. The individual's need for psychological homeostasis leads to mechanisms that neutralize the stress. The unpredictability of the response of others also becomes a source of psychological stress which is again handled by psychological mechanisms that make other people's responses predictable. Denial is one defense mechanism utilized, projection another. These defenses may then lead to the creation of a stereotype out of the characteristics rejected by the individual. Or, if a societal stereotype is available, the utilization of these defenses may be eased by acceptance of the stereotype. This stereotype minimizes anxiety and stress, reinforcing the stereotyping process.

Furthermore, labeling and attribution theory may then explain how the individual utilizes cognitive information to minimize behavioral stress associated with the unpredictability of response. Labels and clearly defined

attributes allow for predictability of response to and from others, or an explanation of an unexpected response. In addition, labeling theory and attribution theory also make use of the societal stereotypes that have developed as cognitive information necessary for a development of the individual stereotype which then reduces stress.

The societal stereotypes interact with the psychological stereotypes by serving as the cognitive backbone for the perception of the individual's changes in and perception of his/her physical, psychological, and social status. The societal stereotype provides beliefs about those statuses which lead to the cycle of fear or unpredictable responses. Finally, the individual acceptance of a stereotype serves to reinforce the societal acceptance of this stereotype, which in turn, reduces the isolation of individual beliefs, further reinforcing the individual acceptance of the stereotypes and contributing to social cohesion and maintainance of the status quo.

CONSEQUENCES OF THE THEORY

When translated into behavior, stereotyping has been alleged to lead to the development of inappropriate and irrelevant health and social services of the elderly (Butler, 1975; Solomon and Vickers, in press). Furthermore, as the author has noted in another paper (Solomon, 1978a) it may be an important stimulus for the development of learned helplessness and apathy in the elderly. This in turn also serves to reinforce stereotypic behavior, in part by the behavior becoming a self-fulfilling prophecy and in part by diminishing the benefit/cost ratio hypothesized by social exchange theory. Because of stereotyping, the older individual's attempts at growth and self-actualization may be retarded, regardless of the availability of appropriate services in the community.

As noted above, Cook (1962) has hypothesized that negative exposure to an old person will result in a development of negative stereotypes of old persons.

However, positive exposure to older persons will lead not to the development of positive stereotypes, but to the development of response to the older person's individuality and less stereotyping in general. If Cook's hypothesis is correct, one would expect that methods can be devised using positive exposure to the elderly to minimize stereotyping. Indeed, work noted by Solomon and Vickers (in press) may have been successful because of the changes in several aspects of the theoretical system presented here. This includes correct data to change the objective indicators of aging. Working with old persons in a positive care context requires that one re-examine the status of old persons and minimizes fear by exposure to an old age that is not "horrible." Repeated "exceptions to the rule" forces the individual to question labels and attributes. All have an effect on minimizing the stress required for individual acceptance of the stereotypes.

On the societal end, stereotypes can be changed only be restructuring exploitative societies and creating meaningful roles for the elderly. To accomplish this, societal roles must be divorced from modes of material production, so that an old person may engage in meaningful work or adopt other meaningful roles, regardless of productivity. This would require flexible retirement options, job retraining, and the creation of new service roles for old people, something possible in our post-industrial society (Bell, 1974). On the other hand, old people must have their roles divorced from consumption, by guaranteeing adequate income to allow for the performance of appropriate roles. New roles must be created and given positive valence, and old roles reinvested with importance. To do this requires a restructuring of society away from a profit-oriented, competitive society to a community-oriented, cooperative society. As Marx ([1893] 1956) stated "The realm of freedom only begins... where that labour which is determined by need and external purposes ceases; it is therefore, by its very nature, outside the sphere of material production proper."

FIGURE I - "MATHEMATICAL" MODEL

Psychoanalytic theory

+ Projection theory

+ Cognitive dissonance theory

+ Status inconsistency theory

+ Labeling theory

+ Attribution theory

+ Societal structure

= Individual acceptance of stereotype

FIGURE 2 – "CIRCULAR" MODEL

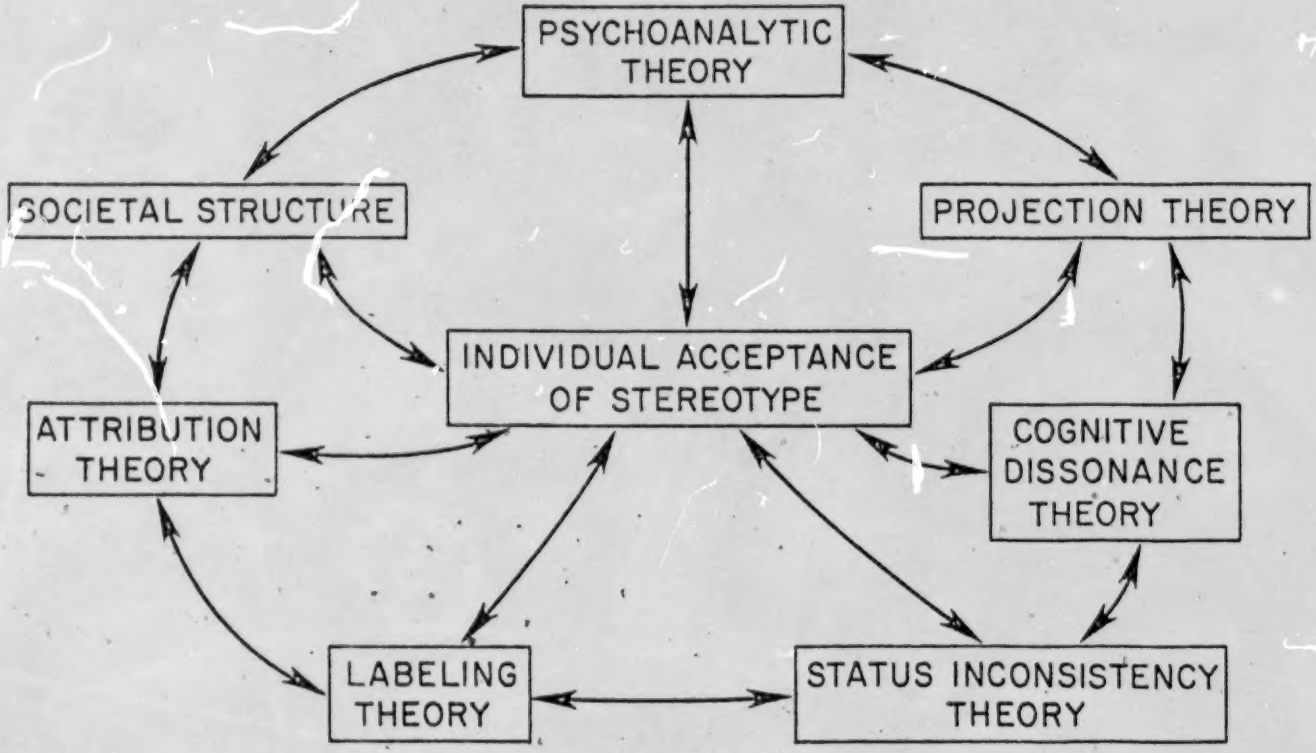
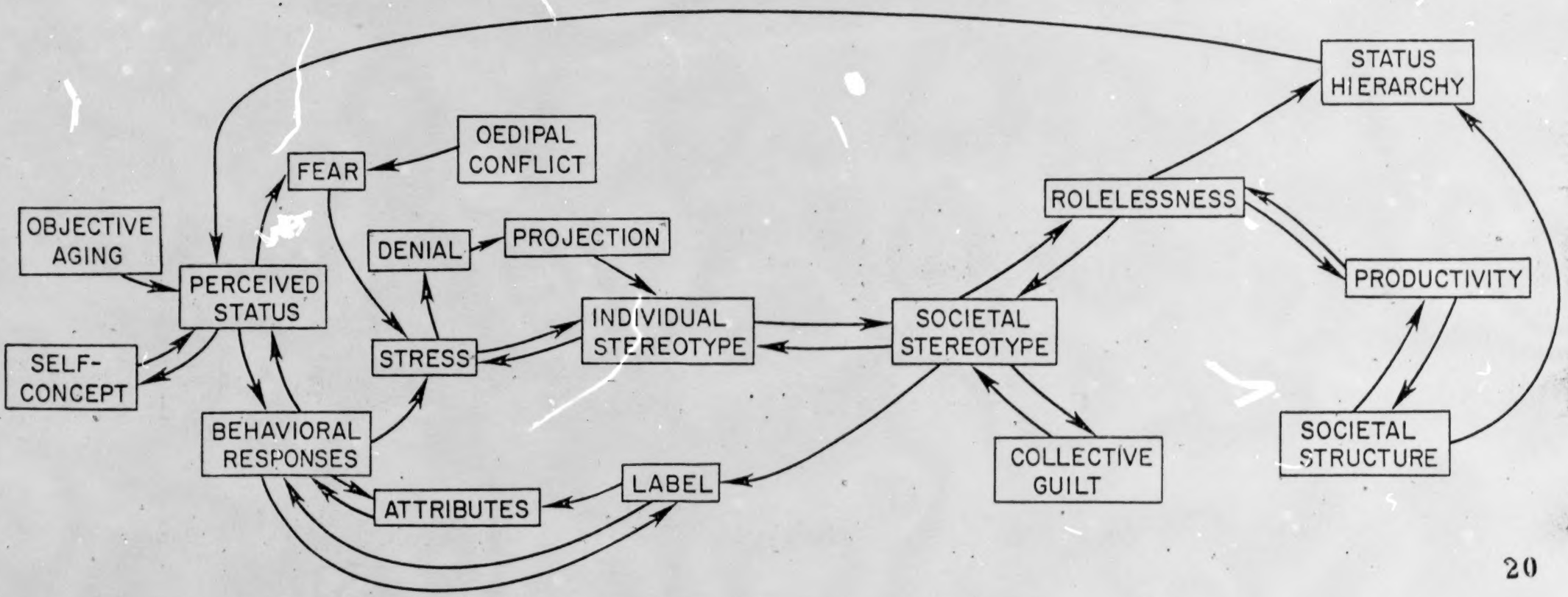


FIGURE 3 – SYSTEMS MODEL



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